

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000034669

Entity Name: OLGA M. LAMERAN, P.A.

FILED
Mar 02, 2005
Secretary of State

Current Principal Place of Business:

1865 79TH ST CAUSEWAY
STE 10A
MIAMI, FL 33141

Current Mailing Address:

1865 79TH ST CAUSEWAY
STE 10A
MIAMI, FL 33141

New Principal Place of Business:

1865 79TH ST CAUSEWAY
STE 7L
MIAMI, FL 33141

New Mailing Address:

1865 79TH ST CAUSEWAY
STE PHA
MIAMI, FL 33141

FEI Number: 59-1405772

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMERAN, OLGA M
1865 79TH ST CAUSEWAY
STE 10A
MIAMI, FL 33141 US

Name and Address of New Registered Agent:

LAMERAN, OLGA M
1865 79TH ST CAUSEWAY
STE PHA
MIAMI, FL 33141 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: OLGA M. LAMERAN

03/02/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LAMERAN, OLGA M
Address: 1865 79TH ST CAUSEWAY APT. 10A
City-St-Zip: MIAMI, FL 33141

Title: VD () Delete
Name: HURTADO, ADRIANA
Address: 1865 79TH ST CAUSEWAY APT. 10A
City-St-Zip: MIAMI, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LAMERAN, OLGA M
Address: 1865 79TH ST CAUSEWAY APT. PHA
City-St-Zip: MIAMI, FL 33141

Title: VD (X) Change () Addition
Name: HURTADO, ADRIANA
Address: 1439 WEST AVENUE 201
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLGA M. LAMERAN

PSTD

03/02/2005

Electronic Signature of Signing Officer or Director

Date